



DECLARATION AND POWER OF ATTORNEY

As a below-named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

5 I believe I am the original, first and sole
inventor (if only one name is listed below) or an
original, first and joint inventor (if plural names are
listed below) of the subject matter which is claimed
and for which a patent is sought on the invention
10 entitled LIFTING MECHANISM FOR RAISING AND LOWERING
TRUCK BOX CAPS (Attorney's Docket No. MCCART-3), the
specification of which was filed on 11/03/03, accorded
Serial No. 10/700,145, and is identified by Attorney's
Docket No. MCCART-3.

15 I hereby state that I have reviewed and understand
the contents of the above-identified specification,
including the claims.

 I acknowledge the duty to disclose information
which is material to the examination of this
20 application in accordance with Title 37, Code of
Federal Regulations, Section 1.56(a).

MCCART-3

I hereby claim priority benefits under Title 35,
United States Code, Section 119(e), of United States
Provisional Patent Application Serial No. 60/423,059,
filed 11/01/2002, for LIFTING MECHANISM FOR RAISING AND
5 LOWERING TRUCK BOX CAPS.

I hereby appoint Pandiscio & Pandiscio, a firm
composed of Nicholas A. Pandiscio, Registration No.
17,293, Mark J. Pandiscio, Registration No. 30,883,
Scott R. Foster, Registration No. 20,570, and James A.
10 Sheridan, Registration No. 43,114, or any of them, of
470 Totten Pond Road, Waltham, Massachusetts 02451,
(Telephone No. 781-290-0060), my attorneys with full
power of substitution and revocation, to prosecute this
application and to transact all business in the Patent
15 Office connected therewith.

Please direct all correspondence in this matter
to:

James A. Sheridan
Pandiscio & Pandiscio, P.C.
470 Totten Pond Road
Waltham, MA 02451-1914
Tel.: 781 290 0060
Fax.: 781 290 4840

Please direct all telephone calls to:

James A. Sheridan or
Mark J. Pandiscio

I hereby declare that all statements made herein
of my own knowledge are true and that all statements
made on information and belief are believed to be true;
and further that these statements were made with the
knowledge that willful false statements and the like so
made are punishable by fine or imprisonment, or both,
under Section 1001 of Title 18 of the United States
Code and that such willful false statements may
jeopardize the validity of the application or any
patent issued thereon.

Inventor's full name: Robert W. B. Davidson
(Deceased)
Former Residence: 12 Cedarock Drive
Kanata, Ontario K2M 2H6
CANADA
Former Postal address: Same
Citizenship: Canadian

I, D.W. Gibson, hereby declare that
I am executing and signing the above-identified
DECLARATION AND POWER OF ATTORNEY as:

_____ the administrator(trix) of the
above-identified deceased inventor.

_____ executor(trix) of the last will and
testament of the above-identified deceased
inventor

✓ _____ legal representative (or heirs) of the
above-identified deceased inventor


That, upon information and belief, I aver those facts that the inventor is required to state.

5

Full name:

DOUGLAS WILLIAM GIBSON

Signature:



Residence:

850 LAKE SHORE DR. #145
DORVAL, QUEBEC
H9S 5T9

10

Postal address:

SAHE

Citizenship:

CANADIAN

15

KK/MCCART3.DEC2



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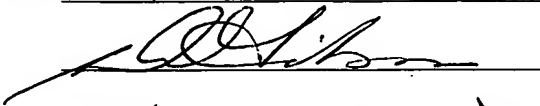
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 executor(trix) of the last will and
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inventor

20 ✓ legal representative (or heirs) of the
above-identified deceased inventor

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Signature: 
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DORVAL, QUEBEC
H9S 5T9
10 Postal address: SAME

Citizenship: CANADIAN

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KK/MCCART3.DEC2